The complete picture of health
Helping People Take Care of Themselves At Work

Dr Steven Boorman
Medical Director UK Occupational Health Services
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Could approach this in different ways!
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What is Good Work?
Marmot highlighted ten key components

- **Precariousness** – stable, risk of loss, safe
- **Individual control** – part of decision making
- **Work demands** – quality and quantity
- **Fair employment** – earnings and security from employer
- **Opportunities** – training, promotion, health, “growth”
- **Prevents** social isolation, discrimination & violence
- **Share information**, participate in decision making
  - collective bargaining, justice if conflicts
- **Work/life balance**
- **Reintegrates** sick or disabled wherever possible
- **Promotes HWB** – psychological needs self efficacy, self esteem, belonging and meaningfulness

- Both physical and psychosocial environments critical
We spend a lot of waking time at work!
I owe Ian’s vision!

Boy’s like cars!
Why did the manuals work?

- Familiarity
- Humour – appropriate
- Simplicity of communication
- Avoided preaching or talking down
- Followed principle of DIY
  - ie SELF CARE
Who do you trust?

“Trust me I’m a doctor!” – was not the natural first reaction!
Taglines!

Feeling first class

Check your nuts

HELP (Health Employment Legal and Practical)

Branding!
IT gives a new opportunity / threat

Even our blue collar workforce increasingly has access, games, tax schemes, home use versus work
Likelihood of lost time – simple actions!

- Sunday Times Top 100 Companies to Work for

- “feeling listened to was the most important factor in determining how much respondents valued their organisation”

<table>
<thead>
<tr>
<th>Management capability and actions</th>
<th>Listened to</th>
<th>Not Listen to</th>
</tr>
</thead>
<tbody>
<tr>
<td>Likelihood of absence</td>
<td>34%</td>
<td>54%</td>
</tr>
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</table>
Engaging for success

- “Our conclusion from the evidence available, including our own first hand observations of the impact of successful employee engagement in practice, is that the correlation between engagement, well-being and performance is repeated too often for it to be a coincidence”

- David McLeod
- Nita Clarke
Health of NHS Employees
Data Modelling ….. is there any real evidence it makes a difference?

Modelling on the staff perception survey responses provided some interesting conditional probabilities relating to lifestyle

<table>
<thead>
<tr>
<th>Smoking as a risk factor for SA</th>
<th>Non Smoker</th>
<th>Smoker</th>
<th>Heavy Smoker</th>
</tr>
</thead>
<tbody>
<tr>
<td>Likelihood of absence</td>
<td>30%</td>
<td>59%</td>
<td>n/a</td>
</tr>
<tr>
<td>Likelihood of absence for a period greater than one day</td>
<td>34%</td>
<td>54%</td>
<td>59%</td>
</tr>
</tbody>
</table>

- Smokers do have more sickness absence
- And NICE has evaluated smoking cessation effectiveness
Simple lifestyle factors do make a difference!!

<table>
<thead>
<tr>
<th>Exercise and sickness</th>
<th>No Exercise</th>
<th>Regular Exercise</th>
</tr>
</thead>
<tbody>
<tr>
<td>Likelihood of no absence in non-smokers</td>
<td>57%</td>
<td>65%</td>
</tr>
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</table>

- But exercise was difficult with demanding jobs
- But arrangements didn’t always make it easy!
And finally – there’s more out there than there has been!

- Recent developments have made good quality self help material much more easy to provide from workplace links
  
- Eg Royal College of Psychiatrists new site
  
- Eg The Responsibility Deal promoting Chronic medical Conditions Guide
  
- Eg Third sector developing work targeted materials
Any questions??

Dr Steven Boorman  
Medical Director UK Occupational Health Services  
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